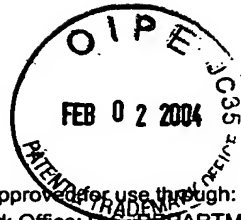


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PTO/SB/01 (6-95)

Approved for use through: 10/31/98 OMB 0651-0032

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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b>  <input type="checkbox"/> Declaration Submitted with Initial Filing    OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing	U.S. Department of Commerce Patent and Trademark Office	Attorney Docket Number	U 0192 OS/MINAP
		First Named Inventor	SUDDERTH, R. Brantley
	<b>COMPLETE IF KNOWN</b>		
	Application Number	10/657,786	
	Filing Date	09/08/2003	
	Group Art Unit		
		Examiner Name	

As a below named inventor, I hereby declare that:  
My residence, post office address, and citizenship are as stated below next to my name.  
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**LOW VISCOSITY COPPER SOLVENT EXTRACTION REAGENT FORMULATIONS**  
(Title of the Invention)

the specification of which  
☒ is attached hereto  
OR  
☒ was filed on (MM/DD/YYYY) 09/08/2003 as United States Application Number or PCT International Application Number 10/657,786 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
<b>60/413,851</b>	<b>09/26/2002</b>	<input type="checkbox"/>

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington DC 20231.

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO: COMMISSIONER OF PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450, ON 01-29-04

Rose A. Stowe (DATE OF DEPOSIT)  
Rose A. Stowe

(SIGNATURE)

January 29, 2004

(DATE OF SIGNATURE)

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**DECLARATION****Page 2**

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365© of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Firm Name  Customer Number  or label   
OR

☒ List Attorney(s) and/or agent(s) name and registration number below:

Name	Registration Number	Name	Registration Number
John E. Drach	32,891		
Steven J. Trzaska	36,296		
Aaron R. Ettelman	42,516		

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: ☒ Customer Number ☐ or label **23657** OR ☐ Fill in correspondence address below

Name	John E. Drach				
Address					
Address					
City		State		Zip	
Country		Telephone	215-628-1414	Fax	215-628-1345

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**Name of Sole or First Inventor:**☐ A petition has been filed for this unsigned inventor

Given Name	R. Brantley	Middle Initial		Family Name	Sudderth	Suffix e.g. Jr.	
Inventor's Signature	<i>R Brantley Sudderth</i>				Date	11/19/03	
Residence: City	Tucson	State	AZ	Country	USA	Citizenship	USA
Post Office Address	7164 N. Lemmon Rock Place						
Post Office Address							
City	Tucson	State	AZ	Zip	85718	Country	USA
						Applicant Authority	

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

(+) inside this box →

U 0192 OS/MINAP

DECLARATION										ADDITIONAL INVENTOR(S) Supplemental Sheet				
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name	Stephen	Middle Initial	M.	Family Name	Olafson					Suffix e.g. Jr.				
Inventor's Signature									Date	11/19/03				
Residence: City		Tucson		State		AZ		Country		USA				
Post Office Address		9670 N. Cliff View Place												
Post Office Address														
City	Tucson		State	AZ		Zip	85737		Country	USA				
								Applicant Authority						
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name	Phillip		Middle Initial	L.		Family Name	Mattison							
Inventor's Signature									Date					
Residence: City		Columbia Heights		State		MN		Country		USA				
Post Office Address		2205 Innsbruck Parkway												
Post Office Address														
City	Columbia Heights		State	MN		Zip	55421		Country	USA				
								Applicant Authority						
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name	Michael		Middle Initial	J.		Family Name	Virnig							
Inventor's Signature									Date	November 19, 2003				
Residence: City		Tucson		State		AZ		Country		USA				
Post Office Address		5013 N. Amapola Drive												
Post Office Address														
City	Tucson		State	AZ		Zip	85745		Country	USA				
								Applicant Authority						
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name			Middle Initial			Family Name								
Inventor's Signature									Date					
Residence: City				State				Country						
Post Office Address														
Post Office Address														
City			State			Zip			Country					
								Applicant Authority						
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto														

(+) inside this box +



U 0192 OS/MINAP

<b>DECLARATION</b>										<b>ADDITIONAL INVENTOR(S) Suppl mental She t</b>													
<b>Nam of Additi nal J int Inv nt r, if any:</b>										<input type="checkbox"/> A petition has been filed for this unsigned inventor													
Given Name		<b>Stephen</b>				Middle Initial		<b>M.</b>		Family Name		<b>Olafson</b>				Suffix e.g. Jr.							
Inventor's Signature												Date											
Residence: City		<b>Tucson</b>				State		<b>AZ</b>		Country		<b>USA</b>				Citizenship		<b>USA</b>					
Post Office Address		<b>9670 N. Cliff View Place</b>																					
Post Office Address																							
City		<b>Tucson</b>				State		<b>AZ</b>		Zip		<b>85737</b>		Country		<b>USA</b>				Applicant Authority			
<b>Name of Additional Joint Inventor, if any:</b>										<input type="checkbox"/> A petition has been filed for this unsigned inventor													
Given Name		<b>Phillip</b>				Middle Initial		<b>L.</b>		Family Name		<b>Mattison</b>				Suffix e.g. Jr.							
Inventor's Signature												Date		<b>10/31/03</b>									
Residence: City		<b>Columbia Heights</b>				State		<b>MN</b>		Country		<b>USA</b>				Citizenship		<b>USA</b>					
Post Office Address		<b>2205 Innsbruck Parkway</b>																					
Post Office Address																							
City		<b>Columbia Heights</b>				State		<b>MN</b>		Zip		<b>55421</b>		Country		<b>USA</b>				Applicant Authority			
<b>Name of Additional Joint Inventor, if any:</b>										<input type="checkbox"/> A petition has been filed for this unsigned inventor													
Given Name		<b>Michael</b>				Middle Initial		<b>J.</b>		Family Name		<b>Virnig</b>				Suffix e.g. Jr.							
Inv nt or's Signature												Date											
Residence: City		<b>Tucson</b>				State		<b>AZ</b>		Country		<b>USA</b>				Citizenship		<b>USA</b>					
Post Office Address		<b>5013 N. Amapola Drive</b>																					
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